EMERGENCY CLASSIFICATION SYSTEM FOR PHYSICIANS

The following Emergency Risk Classification System has been developed in order for obstetricians to give their patients the best information available regarding where to go in case of a hurricane or other disaster. Obstetricians are encouraged to discuss this with their patients at their intake visit and at anytime their risk classification changes.

Patients will fall into one of four categories, Acute Care Risk, High Risk, Intermediate Risk, and Low Risk. Patients in the Acute Care Risk group should go to the hospital. Patients in the High Risk group should go to the Special Care Shelter that has been developed for obstetrical and perinatal patients. The Intermediate Risk group is for patients without complications who are unable to evacuate. They should go to one of the mass shelters. The Low Risk group is for patients without complications who can evacuate.

Acute Care Risk

- Patients greater than 20 weeks gestation in labor.
- Patients less than 35 weeks gestation with advanced dilatation greater than 2 cm. being managed as an outpatient.
- Patients at any gestational age with significant vaginal bleeding.
- Patients with a placenta previa and any vaginal bleeding or contractions.
- Patients with the diagnosis of preeclampsia being managed as an outpatient.
- Diabetics with uncontrolled blood sugars.
- Multiple gestations dilated greater than 2cm being managed as outpatient.

High Risk

- Patient with systolic BP greater or equal to 160 mm Hg and/or diastolic BP greater than or equal to 105 mm Hg.
- Patients greater than 35 weeks with advanced dilatation greater than 2 cm. not in labor.
- Patients greater than or equal to 37 weeks gestation.
- Patients with a placenta previa greater than 32 weeks who do not have vaginal bleeding or contractions.
- Patients with multiple gestations greater than 22 weeks who have been having irregular contractions or dilated less than 2 cm.
- Patients with Fetal growth Restriction.
- Patients with chronic renal disease not on dialysis.
- Diabetics with well controlled blood sugars who can not evacuate.
- Patients with chronic hypertension less than 20 weeks gestation whose blood pressures are not well controlled, but their <u>systolic</u> BP's are less than 160 <u>mm Hg</u> and their <u>diastolic</u> BP's are less than 105 <u>mm hg</u>.
- Immediate postpartum patients who cannot evacuate.

Intermediate Risk

- Patients without medical or obstetrical complications not otherwise specified who cannot evacuate.
- Patients with stable medical or obstetrical complications not otherwise specified who cannot evacuate.
- Patients less than 22 weeks without complications who cannot evacuate.
- Patients with multiple gestations greater than or equal to 22 weeks gestation, but less than 32 weeks gestation who are not having contractions, are only having rare contractions, are dilated 2 cm. or less, and do not have other complications who cannot evacuate.

Low Risk

- Patients without medical or obstetrical problems who can evacuate.
- Patients with stable medical or obstetrical complications not otherwise specified who can evacuate.
- Patients with multiple gestations less than 22 weeks without complications who can evacuate.
- Patients with multiple gestations greater than 22 weeks, but less than 32 weeks who are not having contractions or are having only rare contractions who are dilated 2 cm. or less without other complications who can evacuate.